Emergency Medicine Clerkship

Objectives, Link to SSOM Objectives, & Measurement Method

MEDICAL KNOWLEDGE

1. Demonstrate understanding of basic diagnostic modalities and interpretation of results. (2.1) (EMR documentation, clinical performance, oral presentation, simulation)
2. Relate basic science to patients encountered in the Emergency Department. (1.2) (MCQ, oral presentations)
3. Identify the relevant catastrophic potential diagnoses. (1.2) (EMR documentation, oral presentations, MCQ)
4. Describe the etiology, clinical manifestations and treatment of emergent conditions including: acute coronary syndrome, aortic dissection, acute heart failure, pulmonary embolism, acute respiratory distress, pneumonia, acute asthma exacerbation, COPD exacerbation, compartment syndrome, cervical spine injury, altered mental status, acute stroke, meningitis, subarachnoid hemorrhage, seizure, cholecystitis, appendicitis, abdominal aortic aneurysm dissection, mesenteric ischemia, bowel obstruction, massive gastrointestinal bleeding, perforated viscus, ectopic pregnancy, pelvic inflammatory disease, ovarian torsion, testicular torsion, shock, sepsis, epistaxis, hyper/hypoglycemia, thyroid storm, hyperkalemia, environmental emergencies, and suicidality (1.2) (MCQ, EMR documentation, clinical performance, oral presentation, simulation)
5. Explain the initial approach to a patient in cardiopulmonary arrest and identify shockable rhythms. (1.2) (MCQ, EMR documentation, clinical performance, oral presentation)
6. Explain the general assessment and management principles of poisoned or potentially poisoned patients. (1.2) (MCQ, interactive discussion)
7. Discuss the indications and interpretations of various diagnostic modalities such as point of care ultrasound and EKGs. (1.2) (MCQ, simulation, clinical performance)
8. Describe the diagnostic approach to common presenting symptoms, including abdominal pain, chest pain, dyspnea, fever, substance abuse. (1.2) (MCQ, oral presentation, EMR documentation)
9. Demonstrate an understanding of study design and basic testing characteristics to incorporate evidence based medicine into practice. (1.7) (MCQ, oral presentation, EMR documentation)

PATIENT CARE

1. Demonstrate a focused history and physical exam (2.1) (EMR documentation, oral presentation, direct observation, clinical performance)
2. Formulate, prioritize, and justify an appropriate differential diagnosis, which includes life-threatening conditions. (2.2) (EMR documentation, oral presentation, direct observation)
3. Create a cohesive treatment plan for patients (2.3) (EMR documentation, oral presentation, direct observation, MCQ)

4. Perform general procedures of a physician including ultrasound guided peripheral IV, simple interrupted suturing, bag valve mask utilization, chest compressions, defibrillation. (2.4) (direct observation, clinical performance, simulation)
5. Recognize and interpret common screening and diagnostic test, including electrocardiograms, chest x-rays, electrolyte panels, complete blood count abnormalities. (2.1) (EMR documentation, oral presentation, direct observation, MCQ)
6. Recognize a patient requiring urgent or emergent care and initiate evaluation and management. (2.3) (direct observation, oral presentation, EPA form)

INTERPERSONAL AND COMMUNICATION SKILLS

1. Establish an open rapport with patients and family (3.2) (direct observation, clinical performance, simulation)
2. Explain to the patient and family the findings of the clinical investigation and plans for follow up. (3.2) (direct observation, clinical performance)
3. Demonstrate an ability to effectively communicate with the healthcare team (3.3) (direct observation, clinical performance, simulation)
4. Record a complete history within the electronic medical record with a clear and chronological narrative. (3.4) (EMR documentation)
5. Demonstrate the ability to deal with difficult situations (3.5) (simulation, direct observation, clinical performance)
6. Demonstrate an understanding of how cultural beliefs and spirituality can affect healthcare outcomes, including obtaining a cultural history when appropriate. (3.2) (direct observation, clinical performance, simulation)

PRACTICE BASED LEARNING AND IMPROVEMENT

1. Demonstrate ability to pursue resources necessary to understand and solve clinical problems. (4.4) (direct observation, clinical performance, EMR documentation, oral presentations)
2. Demonstrate an ability to use online resources to identify and evaluate care of patients. (4.5) (direct observation, clinical performance, EMR documentation, oral presentations, clinical question presentation)
3. Critically evaluate one's performance to identify strengths and personal limitations in clinical knowledge or study methods (4.1) (mid-clerkship and end of clerkship feedback session, clinical performance, simulation)
4. Actively seek out timely and formative feedback. (4.3) (clinical performance, simulation)
5. Develop a clinical question related to emergency medicine and use a PICO statement to craft the clinical question, query the literature to support medical decision making, and determine the answer to the question. (4.5) (clinical question presentation)

PROFESSIONALISM

1. Demonstrate professional behavior by completing all clerkship requirements, including course evaluations, in a timely manner. (5.2) (SSOM computer tracking system)
2. Demonstrate professionalism by behaving in a professional, courteous and respectful manner when engaged with peers, faculty, residents and non-physician staff. (5.1) (direct observation, simulation)
3. Demonstrate respect for patient privacy and sensitivity to patients with diverse backgrounds. (5.3) (direct observation, oral presentations, clinical performance)
4. Demonstrate responsibility and accountability by attending and being punctual at all required clerkship activities, including simulation, small groups, grand rounds, and ED shifts. (5.2) (direct observation)
5. Demonstrate professional behavior by requesting any excused absence from required clerkship activities in the required period. (5.2) (direct observation)
6. Demonstrate professional behavior by responding to direct communication from the Clerkship Director or Coordinator in a timely fashion, particularly in circumstances related to academic performance. (5.2) (direct observation)
7. Demonstrate professional and ethical behavior by honestly completing clerkship examinations without attempting to seek advantage by unfair means, and by reporting unethical behavior of peers to clerkship administration. (5.6) (direct observation)
8. Demonstrate commitment to the clerkship with a willingness to assume responsibility and be proactive on shifts. (5.2) (direct observation, clinical performance)

SYSTEMS BASED PRACTICE

1. Construct an appreciation of risk stratification and pretest probability for selected conditions (6.1) (oral presentations, EMR documentation, clinical performance)
2. Reflect on how the ED experience interplays with social justice (6.4) (reflection paper)
3. Reflect on where the ED fits in the continuum of patient care (6.2) (reflection paper, clinical performance, direct observation)

INTERPROFESSIONAL COLLABORATION

1. Work collaboratively with all health professionals on the team to optimize delivery of care to the patient. (7.1/7.3) (direct observation, simulation, clinical performance)
2. Identify similarities and differences in roles and perspectives of other professionals (7.2) (simulation)
3. Recognize informational conflict and apply TeamSTEPPS techniques to assure patient safety. (7.3) (simulation, direct observation)

PERSONAL AND PROFESSIONAL DEVELOPMENT

1. Explain your personal commitment to the service of others in the future as a physician leader. (8.3) (reflection paper)
2. Demonstrate willingness to read around your patient conditions to expand your knowledge base. (8.2) (direct observation, clinical performance)